

ISSUE STATEMENT AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Jo</i>	<i>20</i>	<i>08/09/87</i>
O.I.P.E. CLASSIFIER			<i>8/16</i>
FORMALITY REVIEW	<i>AM</i>	<i>917</i>	<i>09-13-01</i>
RESPONSE FORMALITY REVIEW	<i>H.S.</i>	<i>866</i>	<i>11-19-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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